State of California Health and Welfare Agency Form Approved OMB No. 2050 039 (Expires 9-30-91) Department of Health Services Toxic Substances Control Division Sacramento, California Please print or type. (Form designed for use on elite (12-pitch typewriter). 1. Generator's US EPA ID No. Manifest 2. Page 1 **UNIFORM HAZARDOUS** Information in the shaded areas Document No. is not required by Federal law. WASTE MANIFEST of C | A | D | D | 8 | 6 | 5 | 7 | D | D | D A. State Manifest Document Number 3. Generator's Name and Mailing Address Douglas Aircraft Company Attn: R. Tuell M/S C6-10 19503 S. Normandie Avenue, Torrance, CA 90502 B. State Generator's ID Generator's Phone ( 213 783-5928 or 213-533-7236  $H_1A_1H_1Q_13_16_1Q_1Q_1$ 5. Transporter 1 Company Name US EPA ID Number C. State Transporter's ID JCI Environmental Services <sub>1</sub>C | A | D | O | 5 | 8 | O | 1 | 8 | 3 | 6 | 7 D. Transporter's Phone 7. Transporter 2 Company Name US EPA ID Number E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address US EPA ID Number G. State Facility's ID Oil & Solvent Process Co. 1704 W. 1st Street Azusa, CA 91702 12 Containers 13 Total Quantity Unit Waste No. 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Wt/Vo State RQ, Waste, 111-Trichloroethane EPA/Other ORM-A. UN2831 (FOO1) F001 1-800-424-8802; EPA/Other State EPA/Other CENTER State EPA/Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above a) Profile # F-28916 waste 111-Trjchloroethane 0-100% 쁊 oil, water/resins, dirt, 0-100% inert solids, soda ash 15. Special Handling Instructions and Additional Information In case of accident, call Chemtrec at 800-424-9300. Do not breathe vapors, do not wash into sewer or waterway. If unable to deliver, return to generator. Volume is approximate DOT Emergency Response Guide # 55 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. SPILL, If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined S B to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator. I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. EMERGENCY Printed/Typed Name Day Year 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Month 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Month Day Signature 19. Discrepancy Indication Space 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this granifest except as noted in Item 19. Printed/Typed Name Signature Day

DHS 8022 A (1/88)

EPA 8700-22

(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

print or type. (Form designed for use on elite (12-pitch typewriter).  UNIFORM HAZARDOUS  WASTE MANIFEST  C A D C S S S S S S S S S S S S S S S S S S	Docu	anifest Iment No.		of is not r	equired	ne shaded areas by Federal law.
3. Generator's Name and Mailing Address  Douglas Aircraft Company Attn: R.		0		te Manifest Docum	ient Num	272
19503 S. Normandie Avenue, Torrance 4. Generator's Phone ( 213 783-5928 or 213-533-			Z	te Generator's ID		5 6 9 8
5. Transporter 1 Company Name 6.  JCI Environmental Services   C   /	C. State Transporter's ID  D. Transporter's Phone					
7. Transporter 2 Company Name 8.	US EPA ID Number			te Transporter's ID		600-010/
9. Designated Facility Name and Site Address 10.	US EPA ID Number			nsporter's Phone ate Facility's ID		
Oil & Solvent Process Co. 1704 W. 1st Street					1	
Azusa, CA 91702 <u>IC 1</u> /	<u>Vibiololalalola</u>					
11. US DOT Description (Including Proper Shipping Name, Hazard Clas	ss, and ID Number)	12. Conta	ainers Type	13. Total Quantity	14. Unit Wt/Vol	
RQ, Waste, 111-Trichloroethane ORM-A, UN2831 (FOO1)		0,0,1	T,T		G	State 741 EPA/Other
<b>b</b> .				ONINOL		F00 State
C.		11	1			EPA/Other State
			ı			EPA/Other
<b>d</b> .			<b>.</b>	<u> </u>		State
			1	1111		EPA/Other
J. Additional Descriptions for Materials Listed Above a) Profile # F-28916			K. Handling Codes for Wastes I a. b.			isted Above
waste lll-Trichloroethane 0-100% oil, water, resins, dirt, 0-100% inert solids, soda ash			C.		d.	
15. Special Handling Instructions and Additional Information						
In case of accident, call Chemtrec a into sewer or waterway. If unable to DOT Emergency Response Guide # 55	nt 800-424-9300 o deliver, retui	. Do no rn to g	ot bi Jenei	reathe vap rator. Vol	ors, ume	do not wash is approximat
16.  GENERATOR'S CERTIFICATION: I hereby declare that the contrand are classified, packed, marked, and labeled, and are in all resonational government regulations.	ents of this consignment are spects in proper condition fo	fully and ac r transport b	curately by highy	y described above vay according to a	by prope oplicable	er shipping name international and
If I am a large quantity generator, I certify that I have a program in to be economically practicable and that I have selected the practi present and future threat to human health and the environment; O generation and select the best waste management method that is	icable method of treatment, IR, if I am a small quantity ge	storage, or e enerator, I h	disposa	I currently available	to me v	vhich minimizes the
Printed/Typed Name Robert G. Tuell, Jr.	Signature Rhed	9. T.	المقلدات	91.41		Month Day Year
17. Transporter 1 Acknowledgement of Receipt of Materials  Printed/Typed Name	Signature		4	2		Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials		200	Resident Line	Street State Same		
Printed/Typed Name	Signature	172				Month Day Year
19. Discrepancy Indication Space Per Muke Hedden, Received	Only 616 G	allor				
20. Facility Owner or Operator Certification of receipt of hazardous management	aterials covered by this man	ifest excep	t as not	ed in Item 19.		
Printed/Typed Name	Signature	1.5%				Month Day Year

NSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RF

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Do Not Write Below This Line



1704 West First Street Azusa, California 91702 818/334-5117

Dear: ROBERT TUELL

In an effort to reduce future manifesting errors and any subsequent liability I have listed minor discrepancies associated with the listed manifest.

Mani	fest #_	89479272
X	Item #1	Manifest document # must be a 5 digit, sequentially increasing in number.
	Item #3	Incomplete/incorrect generator address.
	Item #4	Incomplete phone number.
	Item #5	Incomplete/transporter company.
	Item #6	Incorrect ID#.
	Item #9	Incomplete/incorrect facility address.
	Item #10	Incorrect ID#.
	Item #11 ABCD	U.S. DOT description on the manifest doesn't match the description for profile #
	Item #11 ABCD	Incorrect/incomplete RQ (Reportable Quantity). The RQ for the waste is pound(s) per container.
	Item #12	Incomplete/incorrect container size.
i kanta 12 T <del>agawa</del> sepi	Item #14	Incorrect units - see back of manifest.
	Item #16	Incomplete signature/date.
	Item #17	Incomplete signature/date.
	ltem #I	Incorrect/incomplete state-EPA waste code(s).
-	Item #J	May list profile # and/or constituents in this section per conversations with the DOHS.
-	Other	

If you have any questions please call me at (818) 334-5117, or you may refer to the instructions on the back of a blank manifest.

Very truly yours,

Mike Hedden

Receiving Coordinator

## **WORK ORDER**

## **INCORPORATED**

(213) 268-3137

## 4957 EPA NO. **CAD 058018367** FED. TAX NO. **XR 95 - 2769288** WASTE HAULER NO. **139**

SHIPPER		No Francisco	Number Street 10			TIME:	2.00	9 TAGE 1194
	19503 80. N	CRHAIDI	E AVE.			DATE:	KOVEMBER 2, 1	990
	TORRANCE, C	MLIF.					S&S 25651-C	
BILLING ADDRESS	PCICAMBILL E	XXGLAS	com.			RELEASE NO.		
SICEING ADDRESS	DEPT. 711C331-102/P.O. BOX 2731 LONG BEACH, CALIF. 90801					CONTACT	(213) 783-5928 90-11-949 TRACY (213) 783-5927	
						PHONE NO		
	MCDONNELL DESIGLAS CORP.  19503 SO. MORMANDIE AVE.							
JOB ADDRESS						JOB NO		
		TORRANCE, CALIF.				PHONE		
						FHONE		
ORIGIN	TORRANCE					DESTINATION -	IRVINDALE	
COMMODITY						MANIFEST NO.	V9417 927	es.
WORK PERFORMED	CONTRACTOR A	coo car	LCM-VA	CLOW 18	tock to		AND TRANSPORT	
WOHK PEHFOHMED	20 0800 1	N TPME	DALE	CALIF.	FOR DI	GPOSAL.		
				医肾经验检验 医抗性肾髓炎			교사 이동하게 그냥 집안 등 지장인이 있는 그가 살아가 되었다.	u d is 1
RUCK NO. <u>32. 7</u>	TRAIL	ER NO.	r-121		CAP/	ACITY	2	90%
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TRUCK NO. 32.7  START OPERATION	TRAIL	ER NO. 4	r 121		CAP/	ACITY		u And I
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TRUCK NO. 32.7  START OPERATION	TRAIL	STOPSTART	FINISH		CAP/	TRUCKING DISPOSAL WASH OUT	CHARGES FEE	er e
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400.1 10 2-2	TRAIL	STOPSTART	FINISH		CAP/	TRUCKING DISPOSAL WASH OUT	CHARGES FEE T CARRYING	(4 a )
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STARTOPERATION	TRAIL	STOPSTART	FINISH		CAP/	TRUCKING DISPOSAL WASH OUT DISPOSAL CHARGE SURCHAR OTHER TOTAL CH	CHARGES FEE T CARRYING GE	
TRUCK NO. 7	TRAIL	STOPSTART	FINISH		CAP/	TRUCKING DISPOSAL WASH OUT DISPOSAL CHARGE SURCHAR OTHER  TOTAL CH  DRIVER DRIVER	CHARGES FEE T CARRYING GE	